

(Name of Agency)

**(SAMPLE)**  
**RELEASE OF INFORMATION**

Date: \_\_\_\_\_

To: \_\_\_\_\_  
Name of Current/Former Employer

\_\_\_\_\_  
Address of Current/Former Employer

(Employee's name, printed)

I, \_\_\_\_\_, hereby authorize the release of information requested by (insert Agency's name) pertaining to my employment with your organization. I understand that references will be checked before a formal offer of employment will be made to a candidate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Position Held

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Period of Employment